Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS 46								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			U 6minus 20=		* 26			X\$ 9=		OR	X\$18=	468
INDEPENDENT CLAIMS			minus 3 =		* 4			X42=		OR	X84=	335
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	olumn 2	Į	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								1		J	OTHER	
		(Column_1.)		(Colu		(Column 3)	î .	SMALL	YTITM	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	
ME	Independent	×	Minus	***		=		X42=		OR	X84=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
								TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE	<u></u>	<u>"</u> O	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ADIS	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	=	=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
										OR	TOTAL ADDIT. FEE	
ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)												
		CLAIMS		HIGI	HEST		7	<u> </u>	ADDI-			ADDI-
ENTC		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
AMENDMENT	Total	tr	Minus	**		=		X\$ 9=		OR	X\$18=	
MEP	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un		<b> </b>
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	<u></u>
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE											
	The "Highest Nur	nber Previously Pa	id For" (Total o	r Independ	dent) is the	e highest numbe	er foi	und in the app	propriate bo	x in co	olumn 1.	